

UNITED STATES DISTRICT COURT

for the  
Eastern District of New York

NICHOLAS PIAZZA and RANDY URSINI

*Plaintiff*

V.  
PIAZZA'S ICE CREAM & FROZEN FOOD INC., PATRICIA PIAZZA, and SALVATORE  
PIAZZA, jointly and severally

*Defendant*

Civil Action No. 12-3136

NOTICE OF A LAWSUIT AND REQUEST TO WAIVE SERVICE OF A SUMMONS

To: Patricia Piazza

*(Name of the defendant or - if the defendant is a corporation, partnership, or association - an officer or agent authorized to receive service)*

**Why are you getting this?**

A lawsuit has been filed against you, or the entity you represent, in this court under the number shown above. A copy of the complaint is attached.

This is not a summons, or an official notice from the court. It is a request that, to avoid expenses, you waive formal service of a summons by signing and returning the enclosed waiver. To avoid these expenses, you must return the signed waiver within 30 days *(give at least 30 days, or at least 60 days if the defendant is outside any judicial district of the United States)* from the date shown below, which is the date this notice was sent. Two copies of the waiver form are enclosed, along with a stamped, self-addressed envelope or other prepaid means for returning one copy. You may keep the other copy.

**What happens next?**

If you return the signed waiver, I will file it with the court. The action will then proceed as if you had been served on the date the waiver is filed, but no summons will be served on you and you will have 60 days from the date this notice is sent (see the date below) to answer the complaint (or 90 days if this notice is sent to you outside any judicial district of the United States).

If you do not return the signed waiver within the time indicated, I will arrange to have the summons and complaint served on you. And I will ask the court to require you, or the entity you represent, to pay the expenses of making service.

Please read the enclosed statement about the duty to avoid unnecessary expenses.

I certify that this request is being sent to you on the date below.

Date: June 25, 2012



*Signature of the attorney or unrepresented party*

Law Office of Justin A. Zeller, P.C. (by Brandon D. Sherr)

*Printed name*

277 BROADWAY STE 408  
NEW YORK NY 10007-2036

*Address*

bsherr@zellerlegal.com

*E-mail address*

1-212-229-2249

*Telephone number*

# CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only: No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)®

STATEN ISLAND NY 10307

OFFICIAL USE

Postage	\$	\$1.95
Certified Fee		\$2.95
Return Receipt Fee (Endorsement Required)		\$2.35
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$7.25

0005

12

Postmark  
Here

JUN 25 2012  
06/25/2012

Sent To

Patricia Piazza

Street, Apt. No.;  
or PO Box No.

7 IRENE LN

City, State, ZIP+4

Staten Island, NY 10307-2402

9976  
5116  
9775  
T000  
0470  
0001  
7011  
0470  
0001  
7011

3-ILG-JMA Document 6 Filed 07/13/12 Page

## **Certified Mail Provides:**

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

## **Important Reminders:**

- Certified Mail may **ONLY** be combined with First-Class Mail® or Priority Mail®
- Certified Mail is *not* available for any class of international mail.
- **NO INSURANCE COVERAGE IS PROVIDED** with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "*Restricted Delivery*".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

**IMPORTANT: Save this receipt and present it when making an inquiry.**

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Patricia Piazza  
7 IRENE LN  
STATEN ISLAND NY 10307-2402

2. Article Number-  
(Transfer from service)

7011 0470 0001 5116 1766

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •



**Law Office of Justin A. Zeller, P.C.**  
**277 BROADWAY STE 408**  
**NEW YORK NY 10007-2036**